

**Best Available Copy**

**CLAIMS ONLY**

SERIAL NO.

FILING DATE

APPLICANT(S)

**CLAIMS**

|              | AS FILED |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |
|--------------|----------|------|------------------------|------|------------------------|------|
|              | IND.     | DEP. | IND.                   | DEP. | IND.                   | DEP. |
| 1            | /        |      |                        |      |                        |      |
| 2            |          | /    |                        |      |                        |      |
| 3            |          | /    |                        |      |                        |      |
| 4            |          | /    |                        |      |                        |      |
| 5            |          | /    |                        |      |                        |      |
| 6            |          | /    |                        |      |                        |      |
| 7            |          | /    |                        |      |                        |      |
| 8            |          | /    |                        |      |                        |      |
| 9            |          | /    |                        |      |                        |      |
| 10           |          | /    |                        |      |                        |      |
| 11           |          | /    |                        |      |                        |      |
| 12           |          | /    |                        |      |                        |      |
| 13           |          | /    |                        |      |                        |      |
| 14           |          | /    |                        |      |                        |      |
| 15           |          | /    |                        |      |                        |      |
| 16           |          | /    |                        |      |                        |      |
| 17           |          | /    |                        |      |                        |      |
| 18           |          | /    |                        |      |                        |      |
| 19           |          | /    |                        |      |                        |      |
| 20           |          | /    |                        |      |                        |      |
| 21           | /        |      |                        |      |                        |      |
| 22           |          | /    |                        |      |                        |      |
| 23           |          | /    |                        |      |                        |      |
| 24           |          | /    |                        |      |                        |      |
| 25           |          | /    |                        |      |                        |      |
| 26           |          | /    |                        |      |                        |      |
| 27           |          | /    |                        |      |                        |      |
| 28           |          | /    |                        |      |                        |      |
| 29           |          | /    |                        |      |                        |      |
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| 31           |          | /    |                        |      |                        |      |
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| 36           |          | /    |                        |      |                        |      |
| 37           |          | /    |                        |      |                        |      |
| 38           |          | /    |                        |      |                        |      |
| 39           |          | /    |                        |      |                        |      |
| 40           |          | /    |                        |      |                        |      |
| 41           |          | /    |                        |      |                        |      |
| 42           |          | /    |                        |      |                        |      |
| 43           |          | /    |                        |      |                        |      |
| 44           |          | /    |                        |      |                        |      |
| 45           | /        |      |                        |      |                        |      |
| 46           |          | /    |                        |      |                        |      |
| 47           |          | /    |                        |      |                        |      |
| 48           |          | /    |                        |      |                        |      |
| 49           |          | /    |                        |      |                        |      |
| 50           | /        |      |                        |      |                        |      |
| TOTAL IND.   |          |      | ↓                      | ↓    | ↓                      | ↓    |
| TOTAL DEP.   |          |      | ←                      | ←    | ←                      | ←    |
| TOTAL CLAIMS |          |      |                        |      |                        |      |

|              | *    |      | *    |      | *    |      |
|--------------|------|------|------|------|------|------|
|              | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 51           |      | /    |      |      |      |      |
| 52           |      | /    |      |      |      |      |
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| 98           |      |      |      |      |      |      |
| 99           |      |      |      |      |      |      |
| 100          |      |      |      |      |      |      |
| TOTAL IND.   |      |      | ↓    | ↓    | ↓    | ↓    |
| TOTAL DEP.   |      |      | ←    | ←    | ←    | ←    |
| TOTAL CLAIMS |      |      |      |      |      |      |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS